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03-07-02

PTO/SB/05 (11-00)

Approved for use through 10/31/2002 OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. 4858-000357

First Inventor Jeremy Barker

Title ALKALI/TRANSITION METAL PHOSPHATES AND RELATED ELECTRODE ACTIVE MATERIALS

Express Mail Label No. EL 623 594 697 US

10/06/02
10/06/02
10/06/02

APPLICATION ELEMENTS		ADDRESS TO:	
See MPEP chapter 600 concerning utility patent application contents.		Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i>		8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>	
3. <input checked="" type="checkbox"/> Specification [Total Pages 51] <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure 		a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies	
4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <input style="width: 20px; height: 15px; border: 1px solid black;" type="text" value=" "/>]		9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	
5. Oath or Declaration [Total Pages <input style="width: 20px; height: 15px; border: 1px solid black;" type="text" value=" "/>] <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for a continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 		10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney	
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)	
		12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
		13. <input type="checkbox"/> Preliminary Amendment	
		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>	
		15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>	
		16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
		17. <input type="checkbox"/> Other: _____	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No: _____ / _____
 Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.**17. CORRESPONDENCE ADDRESS**

Customer Number or Bar Code Label or Correspondence address below
 (Insert Customer No. or Attach bar code label here)

Name	Harness, Dickey & Pierce, P.L.C.				
Address	P.O. Box 828				
City	Bloomfield Hills	State	MI	Zip Code	48303
Country	United States of America	Telephone	248-641-1600	Fax	248-641-0270

Name (Print/Type)	David L Suter	Registration No. (Attorney/Agent)	30,692
Signature			Date March 6, 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 1506)

Complete if Known	
Application Number	To be assigned
Filing Date	Concurrently Herewith
First Named Inventor	Jeremy Barker
Examiner Name	To be assigned
Group / Art Unit	To be assigned
Attorney Docket No.	4858-000357

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

Deposit Account Number

22-0100

Deposit Account Name

Valence Technology, Inc.

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	740
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$ 740)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims		Fee from below	Fee Paid
	Independent Claims	Multiple Dependent		
	51	-20 **	= 31 X 18 = 558	
Independent Claims	5	-3 **	= 2 X 84 = 168	

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 726)

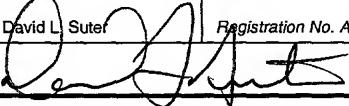
FEE CALCULATION (continued)					
3. ADDITIONAL FEES		Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)
105	130	205	65		
127	50	227	25		
139	130	139	130		
147	2,520	147	2,520		
112	920*	112	920*		
113	1,840*	113	1,840*		
115	110	215	55		
116	400	216	200		
117	920	217	460		
118	1,440	218	720		
128	1,960	228	980		
119	320	219	160		
120	320	220	160		
121	280	221	140		
138	1,510	138	1,510		
140	110	240	55		
141	1,280	241	640		
142	1,280	242	640		
143	460	243	230		
144	620	244	310		
122	130	122	130		
123	50	123	50		
126	180	126	180		
581	40	581	40		40
146	740	246	370		
149	740	249	370		
179	740	279	370		
169	900	169	900		

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40)

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	David L Suter	Registration No. Attorney/Agent)	30,692	Telephone (248) 641-1600
Signature			Date	March 6, 2002

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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